



## PART B - FEE(S) TRANSMITTAL

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7590

04/18/2007

Hamre, Schumann, Mueller & Larson P.C.  
P.O. Box 2902-0902

Minneapolis, MN 55402

07/13/2007 HDEMSS2 00000072 503478 10682229

01 FC:1501 1400.00 DA  
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Peggy Kerkhove

(Depositor's name)

*Peggy Kerkhove*

(Signature)

July 12, 2007

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/682,229	10/08/2003	Suguru Tabara	12844.004SUS01	8128

TITLE OF INVENTION: METHOD OF MANUFACTURING SEMICONDUCTOR DEVICE

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	07/18/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
CULBERT, ROBERTS P	1753	438-719000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hamre, Schumann,  
2 Mueller & Larson, P.C.  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ROHM Co., Ltd.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Kyoto, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies \_\_\_\_\_

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Douglas P. Mueller*

Date July 12, 2007

Typed or printed name Douglas P. Mueller

Registration No. 30.300

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# HAMRE, SCHUMANN, MUELLER & LARSON, P.C.

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FAX TRANSMISSION July 12, 2007

TO: Mail Stop: ISSUE FEE  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

FROM: Douglas P. Mueller

OUR REF: 12844.0045US01

TELEPHONE: (612) 455.3800

Total pages, including cover letter: 2

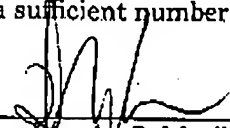
PTO FAX NUMBER: 571.273.2885

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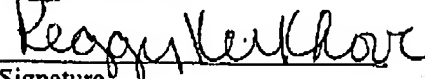
Applicant: TABARA  
Serial No.: 10/682,229  
App. Filed: October 8, 2003  
Group Art No.: 1763  
Confirmation No.: 8128

Please charge Deposit Account No. 50-3478 in the amount of \$1400 for payment of the Issue Fee and \$300 for payment of the Publication Fee. Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

By:   
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I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Peggy J. Kerkhove

  
Signature

July 12, 2007  
Date

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